

CHS Personal Day Form

This form must be completed in order for students to use one of their allotted 5 personal days for the school year. This form must be turned into the attendance office 7 days prior to the 1st absent date listed on this form.

DATE: _____

STUDENT NAME: _____

DATE(S) ABSENT: _____

REASON FOR ABSENCE: _____

Parent Signature: _____

Student Signature: _____

**Personal days will count towards a student's total absences for the school year. Once a student reaches 10 total absences, they will be placed on the Doctor's Note List, per CS Policy 6.20*



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